## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

11 60.1150101

CLAIMS AS FILED - PART I (Column 1) (Column 2								SMALL ENTITY TYPE O			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS			28					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			2 \mathred minus 20=		* 9			X\$ 9=		OR	X\$18=	160	
INDEPENDENT CLAIMS			7 minus 3 =		* P			X42=		OR	X84=	100	
MULTIPLE DEPENDENT CLAIM PRESENT					•			+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter					r "0" in c	column 2		TOTAL		OR	TOTAL	902	
CLAIMS AS AMENDED - PART										,	OTHER	-	
		(Column 1)		(Colu			)	SMALL	ENTITY	OR	SMALL	ENTITY	
<b>AMENDMENT A</b>		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 31	Minus	** 5	19	= 2		X\$ 9=		OR	X\$18= <b>{</b>	136	
	Independent	* NTATION OF MI	Minus	***	<u>3</u>	=	$\  \ $	X42=		OR	X84=	184	
	FINOT PRESE	NATIONOFINE	JLIIPLE DE	PENDEN	CLAIM		J	+140=	·	OR	+280=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	Dd.	
		(Column 1)		(Colu	mn 2)	(Column 3							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	] [	X42=		OR	X84=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	PENDEN	CLAIM		┛╏	+140=		OR	+280=		
							L	TOTAL			TOTAL		
		(Oal 4)		(O-1)	0			ADDIT. FEE		Jon	ADDIT. FEE		
		(Column 1) CLAIMS			mn 2) HEST	(Column 3	۱,		4001			4551	
<b>AMENDMENT C</b>		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	(	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=-	11	X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J ∤						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. F										OR	ADDIT. FEE		
		nber Previously Pa						ınd in the app	ropriate box	k in co	lumn 1.		